

## ADOPTIVE FAMILY INFORMATION FORM

PLEASE MAIL FORM TO: P.O. BOX 5515, GRANTS PASS, OR 97527

ADDRESS: Best contact Pho						
	ONE:					
OUR IDENTITY: P			EN	NAIL:		
í C	DENTITY: PLEASE & CHECK ALL THAT APPLY.		TYPE(S) OF ADOPTION IN YOU	JR FAM	ILY: PLEA	ASE ✓ CHECK ALL THAT APPLY.
	Adoptive Parent Teen Adoptee Adult Adoptee	<ul><li>□ Birth Mother</li><li>□ Adoptive Grandparent</li><li>□ Other</li></ul>	Private OPEN Domestic AGENCY INTERNATIONAL - C			LOSED
	AGE(S) ADOPTED	CURRENT AGE(S)  BIRTH FOSTER ADOPTED  BIRTH FOSTER ADOPTED  BIRTH FOSTER ADOPTED	NAME	AGE(S) ADOPTED	CURRENT AGE(S)	CHECK ONE  BIRTH FOSTER ADOPTED  BIRTH FOSTER ADOPTED  BIRTH FOSTER ADOPTED
						☐ BIRTH ☐ FOSTER ☐ ADOPTED
FOR MORE	UP-TO-DATE INFO	DRMATION ON CHOSEN INTERNATION	NAL PLEASE VISIT OUR WEBSI	TE: W	WW.CHO	OSENINTERNATIONAL.ORG
CINTEL IAME:	SEN RNATIONAL	ADOPTIVE I	FAMILY INFORM TO: P.O. BOX 551	O R	MA	TION FORM
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		ADOPTIVE I	FAMILY INFORM TO: P.O. BOX 551	O R	MA	TION FORM
ADDRESS:		ADOPTIVE I	FAMILY INFORM TO: P.O. BOX 551	OR 15, G	M A	TION FORM
ADDRESS:	ONE:  PLEASE  CHECK ALL T  Adoptive Parent  Teen Adoptee  Adult Adoptee	ADOPTIVE I	FAMILY INFORM TO: P.O. BOX 551  EN  TYPE(S) OF ADOPTION IN YOU  Private OPEN  Domestic AGENCY	OR 15, G	M A GRANT  ILY: PLEA  Private C  State FOS	TION FORM TS PASS, OR 97527  ASE  CHECK ALL THAT APPLY.

Celebrating...Educating...Encouraging...Those Whose Lives are Touched by Adoption